IN THE UNITED STATES PATENT AND TRADEMARK OFFICE Examiner:

Blessing M. Fubra, Chilles Colors of Carlos Car

In re Application of:

Serial No.:

Filed:

September 28, 2001

Attorney's Docket Number: 50623.00132

Title:

A Medical Device Containing Light-Protected Therapeutic Agent And a

Method For Fabricating Thereof

Commissioner for Patents Washington, DC 20231

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT PURSUANT TO 37 C.F.R. §§1.97-1.98

Dear Examiner Fubara:

In accordance with the duty of disclosure under 37 C.F.R. §1.56 and pursuant to 37 C.F.R. §§1.97-1.98, Applicant hereby notifies the U.S. Patent and Trademark Office of the references listed on the attached Form PTO-1449. One copy of each cited reference is submitted herewith. In addition, enclosed is an International Search Report which was cited in a related PCT application. The Examiner is requested to make this information of official record in the application.

The submission of the listed documents is not intended as an admission that any such document constitutes prior art against the claims of the present application. Applicant reserves the right to dispute any of the listed documents as prior art during examination. Furthermore, Applicant does not waive any right to take any action that would be appropriate to antedate or otherwise remove any listed document as a competent reference against the claims of the present application. The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made or that no other material information may exist.

The Examiner is requested to initial the enclosed Form PTO-1449 and return a copy thereof to the undersigned.

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The present Supplemental Information Disclosure Statement is being submitted after receiving the International Search Report citing the references and within three months of the filing date of the counterpart foreign application. Therefore, no filing fee us due as specified in 37 C.F.R. §1.97(e) and 37 C.F.R. §1.17(p).

However, if for any reason an insufficient fee has been paid, please charge the insufficiency to Deposit Account No. 07-1850.

Date: February 4, 2003 SQUIRE, SANDERS & DEMPSEY L.L.P. One Maritime Plaza, Suite 300 San Francisco, CA 94111 Telephone (415) 954-0200 Facsimile (415) 393-9887

Respectfully submitted,

Victor Repkin

Attorney for Applicant

Reg. No. 45,039